MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SER. NO. 09/482 335 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				INC.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.								
1	1		1				51						
2		1		1			52						
3		1		1			53						
4		1		1			54						
5		3		1			55						
6		①					56						
7		①		1			57						
8		①		1			58						
9		①					59						
10		①		1			60						
11	1	1	1				61						
12		1		1			62						
13		2		1			63						
14		2		1			64						
15		2		1			65						
16		①		1			66						
17		①		1			67						
18		①		1			68						
19		①		1			69						
20	1		1				70						
21		1		1			71						
22		1		1			72						
23		1		1			73						
24		1		1			74						
25		5		1			75						
26		5		1			76						
27		5		1			77						
28		①		1			78						
29		①		1			79						
30		①		1			80						
31		①		1			81						
32		①		1			82						
33		①		1			83						
34		①		1			84						
35		①		1			85						
36		①		1			86						
37		①		1			87						
38		①		1			88						
39	1			1			89						
40		1					90						
41		1		1			91						
42		2		1			92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	3		3				TOTAL IND.						
TOTAL DEP.	57		39				TOTAL DEP.						
TOTAL CLAIMS	60		42				TOTAL CLAIMS						

PTO-1360 (3-78)

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